

APPLICATION FOR REAL ESTATE TAX RELIEF

CITY OF LYNCHBURG, VIRGINIA
Commissioner of the Revenue
City Hall
LYNCHBURG, VIRGINIA 24504

Name and property address as it appears on tax bill

Name: _____

Property Address: _____

City: _____ State: _____ Zip Code: _____

For Office Use Only

Tax Year _____
Property Number _____
Property Value _____
Gross Income \$ _____
Net Worth \$ _____

Property Owner: _____
Last Name First Middle

Birth Date: _____ Social Security No. _____ Phone: _____
Mo. Day Yr.

Spouse: _____
Last Name First Middle

Birth Date: _____ Social Security No. _____ Phone: _____
Mo. Day Yr.

Mailing Address if it is different from the residence address:

Street No. Street

City State Zip Code

Read Requirements for Exemption on Page 4.

The information required on this application must be filled out in its entirety and returned to the Commissioner of the Revenue, City Hall, Lynchburg, Virginia 24504-1674. Applications must be filed by May 1, of the taxable year for which the exemption is applied. Spaces on the application that are not applicable to the taxpayer should be completed as "Not Applicable" or "\$0.00" as indicated by the question. Questions that cannot be answered within the spaces provided may be answered by attaching additional sheets to this application. **This exemption is granted on an annual basis and a new application must be filed each year.** All information on the application is confidential and not open to public inspection. For additional information, please phone 455-3884.